



COVID – 19 Expected Practices

eConsult Scheduling During COVID-19

Updated: 04/010/20

Purpose:

To reduce the risk of COVID-19 transmission to our patients and staff and be prepared for possible future surge response and workforce shifts.

Procedure:

To appropriately manage DHS' eConsult volume rationally and safely, the Specialty Care Linkage will:

1. Use same screening script as PAC during all scheduling touch points to advise patients what to do in case of ILI symptoms.
2. Continue to outreach to and schedule face-to-face appointments for eConsults closed with timeframes of "Less than 15 days", "2-4 weeks" or "1-2 months". These patients have already been triaged by a provider and were deemed to require a time-sensitive face-to-face visit, it is recommended, at this time, for sites to retain that in-person visit.
3. Only perform outreach on eConsults with timeframes > 2 months for patients whose appointments are coming due in that month. For example, an eConsult closed with time frame of "2-3 months" in January, will be due for an appointment in April using the upper limit of the time frame. Patients in this category will either be given a phone visit or a face-to-face visit depending on the specialty and their ability to perform new patient consultation over phone. Please refer to the table at the end of this document. Clinics should continue to scrub their schedules and can re-triage any patient booked by the SCL and disposition differently using their clinical judgement.
4. Advise all specialty reviewers to judiciously use time frames <2 months. For any patient who can be safely scheduled in a longer timeframe, it is recommended to use "next available" as selection. Specialty reviewers can also specify when closing the dialogue if a phone visit would be appropriate.
5. A basic script has been developed for patients who call to schedule a non-time sensitive appointment, based on previous outreach.
6. Patients should NOT have their appointments cancelled without being given appropriate follow-up. The follow-up can be a phone visit, and/or a rescheduled in-person visit in 2 months.
7. If a patient's clinical status changes and they are felt to require a sooner appointment, provider can email the SCL (SCLInquiry@dhs.lacounty.gov) or patient can call the SCL (855-521-1718). The SCL will follow their existing workflow and escalate back to the specialty reviewer who can determine if a sooner appointment is necessary or can still be safely deferred.

Timeframes and Dispositions

Less than 15 days

- Scheduled as face to face

2-4 weeks

- Scheduled as face to face

1-2 months

- Scheduled as face to face

2-3 months

- No outreach unless appt due
- If appt due, schedule phone visit for Group A Specialties
- If appt due, schedule F2F for Group B Specialties

3-6 months

- No outreach unless appt due
- If appt due, schedule phone visit for Group A Specialties
- If appt due, schedule F2F for Group B Specialties

Next Available

- No outreach unless appt due
- If appt due, schedule phone visit for Group A Specialties
- If appt due, schedule F2F for Group B Specialties

<u>Group A</u>	<u>Group B</u>
<ul style="list-style-type: none">• Anaphylaxis/Allergy• Cardiology• Dermatology• Diabetes/Endocrine• Gastroenterology• Genetics (adult/obstetrics)• Gynecology• Hematology• Hepatology• HIV Services• Infectious Diseases• Nephrology• Neurology• Oncology• Pediatric Medical Specialties• Pulmonary• Rheumatology• Transgender Care	<ul style="list-style-type: none">• Obstetrics• Gynecology/Oncology• Limb Salvage• Neurosurgery• Ophthalmology/Optometry• OMFS• Orthopedics• Otolaryngology• Plastic Surgery• Podiatry• Surgery (general, bariatric, breast, cardiac, colorectal, hepatobiliary, thoracic, vascular)• Urology